

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Protect Our Future PAC
FEC IDENTIFICATION NUMBER C C00801514
Check if [x] 24-hour report [] 48-hour report [x] New report [] Amends report filed on

Full Name of Payee Person 2 Person Solutions
Mailing Address 55 Washington St Ste 702
City Brooklyn State NY Zip Code 11201-1063
Purpose of Expenditure Direct Mail Services
Name of Federal Candidate CONOLE, FRANCIS, , , [x] Support [] Oppose
Office Sought: [x] House District: 22 [] President [] Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 476391.89
Disbursement For: [x] Primary [] General 2022 [] Other (specify)

Date of Public Distribution/Dissemination 08 / 04 / 2022
Amount 33797.12
Transaction ID : 500263207
Date of Disbursement or Obligation 08 / 10 / 2022

Full Name of Payee Person 2 Person Solutions
Mailing Address 55 Washington St Ste 702
City Brooklyn State NY Zip Code 11201-1063
Purpose of Expenditure Direct Mail Services
Name of Federal Candidate CONOLE, FRANCIS, , , [x] Support [] Oppose
Office Sought: [x] House District: 22 [] President [] Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 476391.89
Disbursement For: [x] Primary [] General 2022 [] Other (specify)

Date of Public Distribution/Dissemination 08 / 10 / 2022
Amount 33797.12
Transaction ID : 500263208
Date of Disbursement or Obligation 08 / 10 / 2022

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 67594.24, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Montoya, Dacey, , , [Electronically Filed] Date 08 / 10 / 2022

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Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Name of Federal Candidate [] Support [] Oppose
Office Sought: [] House District: [] President [] Senate State: []
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: [] Primary [] General [] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 12394.89; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 79989.13

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Montoya, Dacey, , , [Electronically Filed] Date 08 / 10 / 2022